

 DRYDEN		POLICY
SECTION: HUMAN RESOURCES	NO: HR-OR-01	
REFERENCE: ORIENTATION	Date: June 24, 2020	
		Next Review Date: June 2022

TITLE: ORIENTATION

1. 0 POLICY

- 1.1 An orientation program has been designed and will be provided to help all new permanent full-time, part-time, seasonal, casual and term employees during their first week of employment with the City of Dryden.
- 1.2 This program will provide the employee with detailed information about the working conditions, training, scheduling and all applicable policies, procedures, expectations, processes etc., including possible future employment opportunities with the City of Dryden.

2.0 PROCEDURES

- 2.1 Every effort will be made to initiate and implement the orientation process with each new employee within the week of their employment.
- 2.2 The immediate Manager/Supervisor and Human Resources Staff (when appropriate) will meet with each new employee to provide and review the required check lists.
- 2.3 Each person identified in 2.2 will provide information and/or direction to the employee regarding each item area on their respective checklist. Further, each will initial-off and date the areas as they are identified, reviewed and discussed with the employee.
- 2.4 The applicable checklist(s) identified in a, b and c which are appended to the end of this policy will be provided to new employees and include the following:

- (a) Orientation Checklist for Employees, Students & Volunteers
- (b) Payroll and Benefits Checklist
- (c) Health and Safety Checklist

2.5 Upon completion of the orientation process, the checklist(s) will be submitted to the Human Resources Department for filing in each employee's respective personal file.

History			
Approval Date:	November 1, 2004	Approved by:	Council Resolution
Amendment Date:	June 24, 2020	Approved by:	CAO
Amendment Date:		Approved by:	
Amendment Date:		Approved by:	
Amendment Date:		Approved by:	
Amendment Date:		Approved by:	

Orientation Checklist for Employees, Students & Volunteers			
Code of Conduct, Dress & Confidentiality			
Concerns/issues & Communication			
Fire & Emergency plans & exits			
Hours of work – breaks, location & overtime			
Preferred Name			
Parking areas			
Sick leave – who to call & other absences – absent request form			
Staff & safety meetings			
Time sheets – visit payroll (Schedule an appointment)			
Employee I.D. tags			
Job responsibilities/job description			
Probation & evaluations			
Outlook Orientation			
Finance Orientation-Optional (Mastercard, PO's/Vadim etc....)			
IT Orientation (e-mail, telephone, alarm code etc....)			
City Organization Chart/tour with Introductions (as requires)			
Individual plans – sign off			
City Website Orientation			
Give copy of Supervisor phone #'s & add staff numbers to list			
Forms	Originals to HR	Copy to H&S Co- Ordinator (email)	Copy to H&S Board at site
Supervisor Checklist for Employees, Students & Volunteers			
Staff Health Assessment (optional to department)			
Emergency Contact Information (*copy for each site)			
Employee Health & Safety Orientation Checklist			
Staff Consent for Photographs			
City Confirmation of Receipt & Understanding for Policies			
Frist Aid/CPR-JHSC			
Criminal Reference Check/Vulnerable Sector Screen (*add to master list)			

Employee Name

Employee Signature

Date

Supervisor Name

Supervisor Signature

Date



DRYDEN

Payroll and Benefits Checklist For New Employees

Employee Name:		
Department:		
Immediate Supervisor:		
	Date	Initials
Payroll Documentation		
- Banking Information		
- TD1		
- IBEW Registration Form (if applicable)		
Payroll Schedule		
Electronic Pay Stubs Form		
Benefit Plan and Costs (if applicable)		
OMERS (Pension) (if applicable)		
Time Sheets / Absence Reports		
Change in Status		
Driver's License Copy		
Other		

Upon completion this form must be forwarded to the HR Department for filing.

Signature of Employee: _____ Date: _____



EMPLOYEE HEALTH AND SAFETY ORIENTATION CHECKLIST

Employee Name: _____

To be completed for:

- ☐ Staff (new)
 ☐ Employees (contract hired)
- ☐ Staff (promoted or transferred)
 ☐ Student Employees
- ☐ Staff (returning from extended leave)
 ☐ Staff (seasonal)

Employee Initials		Date	Supervisor's Initials
	Discuss commitment to Health and Safety		
	Review the Health and Safety Vision and Policy statement and procedure and where they are located. (HR-HS-01)		
	Review the roles and expectations for management and/or supervisor(s) and/or employees. (HR-HS-01)		
	Review the process for reporting hazards, near misses, injuries and illnesses. (HR-HS-08)		
	Review safe work practices and standard operating procedures and training specific to the job/task.		
	Discuss hazards associated with worker's job (refer to Job Hazard Analysis if applicable).		
	Train in the applicable personal protective equipment the employee is required to wear		
	Arrange for an ergonomic assessment if necessary.		
	Review First Aid Kit location, contents & procedures. (HR-HS-23). Introduce to designated first aid employee(s).		
	Introduce new employee to emergency personnel for their work location.		
	Complete WHMIS 2015 training appropriate for the job/task assigned. Location of SDS/MSDS book. (Procedure HR-HS-31)		
	Introduction to the Joint Health and Safety Committee and/or Health and Safety Representative. (HR-HS-25 OR HR-HS-26 if a Federal Employee)		
	Review Health and Safety Bulletin Board and discuss contents.		

	Review Workplace Anti Violence, Harassment and Sexual Harassment Policy (HR-HS-18).		
	Tour the facility and review emergency procedures and other workplace requirements.		
	Review the MOL Prevention Starts Here Health & Safety Awareness Package		

Employee Initials	Check off and review policies/procedures that are applicable to your workplace.	Date	Supervisor's Initials
	<ul style="list-style-type: none"> <input type="checkbox"/> Smoke and Vapour Free Workplace (HR-HS-02) <input type="checkbox"/> Hearing Conservation (HR-HS-04) <input type="checkbox"/> Ergonomics (HR-HS-05) <input type="checkbox"/> Safety Recognition Program (HR-HS-06) <input type="checkbox"/> Discipline (HR-DI-01) <input type="checkbox"/> Vehicle Operation Policy/Procedure (HR-HS-09) <input type="checkbox"/> Contractor Safety (HR-HS-10) <input type="checkbox"/> Fire Extinguishers (HR-HS-12) <input type="checkbox"/> Refusal to Work & Bilateral Work Stoppage (HR-HS-13) <input type="checkbox"/> Health & Safety Training (HR-HS-14) <input type="checkbox"/> Standard Operating Procedures Requirements (HR-HS-16) <input type="checkbox"/> Hazardous Recognition (HR-HS-19) <input type="checkbox"/> Office Safety (HR-HS-20) <input type="checkbox"/> Sharps & Needle Stick Injuries (HR-HS-21) <input type="checkbox"/> Heat Related Illness Procedure (HR-HS-22) <input type="checkbox"/> Personal Protective Equipment Policy (HR-HS-24) <input type="checkbox"/> JHSC – Policy & Procedure Prov. (HR-HS-25) <input type="checkbox"/> JHSC – Policy & Procedure Federal (HR-HS-26) <input type="checkbox"/> Material Handling Training (HR-HS-27) <input type="checkbox"/> Workplace Inspection (HR-HS-28) <input type="checkbox"/> Emergency Preparedness (HR-HS-30) <input type="checkbox"/> Designated Substances (HR-HS-32) <input type="checkbox"/> Hot Work Procedure (HR-HS-33) <input type="checkbox"/> Confined Space Procedure (HR-HS-35) <input type="checkbox"/> Lock Out/Blocking Procedure (HR-HS-36) <input type="checkbox"/> Transportation of Dangerous Goods (HR-HS-37) <input type="checkbox"/> Emergency Evacuation City Buildings (HR-HS-40) <input type="checkbox"/> Early Return to Work Procedure (HR-HS-45) <input type="checkbox"/> Visitor Policy (HR-HS-46) <input type="checkbox"/> Working Alone (HR-HS-47) <input type="checkbox"/> Robbery Prevention (HR-HS-48) <input type="checkbox"/> Cash Handling (HR-HS-49) <input type="checkbox"/> WSIB Procedures (HR-HS-51) <input type="checkbox"/> Fall Protection (HR-HS-52) <input type="checkbox"/> Covid-19 Working from Home (HR-HS-53) <input type="checkbox"/> Preventing Covid-19 (HR-HS-54) <input type="checkbox"/> Infection and Disease Control (HR-HS-55) <input type="checkbox"/> Visitor Safety Procedure (specific) <input type="checkbox"/> Opening & Closing Procedures (specific) <input type="checkbox"/> Emergency Evacuation Procedure (specific) 		

	<input type="checkbox"/> Pre-Use Inspection Procedure (circle checks - specific) <input type="checkbox"/> Preventative Maintenance Procedure (specific) <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		

Employee Name: _____

Employee Signature: _____

Supervisor Signature: _____

Date of Completion: _____

REVISED: May 1, 2020